

Message Text

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SUBJECT: US COOPERATION/ASSISTANCE IN SELECTIVE FOREIGN
DRUG ABUSE PREVENTION ACTIVITIES

REF: STATE 254205

SUMMARY: EGYPTIAN DRUG ABUSE PREVENTION EFFORTS ARE VERY LIMITED AND ARE SUPPORTED ONLY BY A HANDFUL OF DEDICATED AND CONCERNED PERSONS AGAINST A CENTURIES-OLD TRADITION OF NARCOTICS USE. EGYPTIAN DRUG CONTROL EFFORTS NOW CONSIST ALMOST ENTIRELY OF INTERDICTION AND SEIZURES. THERE EXISTS NO FERTILE GROUND FOR US ASSISTANCE IN THIS FIELD. END SUMMARY.

1. AS CANDIDLY EXPLAINED BY GENERAL FARAG, HEAD OF ANTI-NARCOTICS ADMINISTRATION, MININTERIOIR, ISLAM, WHICH GUIDES THE DAILY LIVES OF THE VAST MAJORITY OF EGYPTIANS, DOES NOT CONDEMN THE USE OF NARCOTIC DRUGS. ADDICTION PROBLEMS IN EGYPT ARISE FROM ABUSE OF OPIUM AND HASHISH, NOT FROM MORE REFINED NARCOTICS. OPIUM IS PRIMARILY CONSUMED IN UPPER EGYPT WHERE THE AGED AND FAILING USE IT TO EASE HARDSHIPS OF LIFE. HASHISH AND, TO A MUCH LESSER DEGREE, OPIUM, ARE USED THROUGHOUT THE REST OF EGYPT, ALLEGEDLY BOTH FOR SEXUAL PURPOSES (LARGE FAMILIES ARE A SOURCE OF PRIDE AS WELL AS ECONOMIC SECURITY) AND TO RELIEVE THE BOREDOM AND FRUSTRATION BORN OF POVERTY, UNEMPLOYMENT AND

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DIRT-FLOOR LIVING STANDARDS.

2. USE OF NARCOTICS IS LEGALLY A CRIME, BUT DUE TO NON-THREATENING NATURE OF ADDICTS, IT IS WIDELY TOLERATED UNLESS SOME OTHER ILLEGAL ACT IS COMMITTED. IN SENTENCING CRIMINALS WHO ARE ADDICTS, JUDGES HAVE THE OPTION OF RENDERING PRISON SENTENCES OR REQUIRING "HOSPITALIZATION AND TREATMENT" OF THE CONVICTED ADDICT. UNFORTUNATELY, THE ONLY FACILITIES FOR TREATMENT OF ADDICTS ARE ONE "SECTION" (SIZE UNKNOWN) EACH IN TWO "NEUROLOGICAL" HOSPITALS IN CAIRO. GENERAL FARAG DID NOT HAVE FACTS AVAILABLE AS TO THE EXACT NATURE OF THESE FACILITIES AND WHEN PRESSED AS TO HOW MANY ADDICTS COULD BE EXPECTED TO BE CURED IN THE FACILITIES PER YEAR, HE CANDIDLY STATED THAT, DUE TO POOR ORGANIZATION, LACK OF COORDINATION AND GENERAL APATHY, THE NUMBER IS "VIRTUALLY ZERO".

3. FROM A POLICY POINT OF VIEW, CONDITIONS IN EGYPT ARE NOT SUCH THAT ANY SMALL COST PROGRAM WOULD EVER SIGNIFICANTLY CONTRIBUTE TO US NATIONAL DRUG CONTROL PROGRAM EFFORTS.

A. EGYPT IS A NARCOTICS CONSUMING COUNTRY, NOT A COUNTRY THROUGH WHICH NARCOTICS TRANSIT EVENTUALLY TO FIND THEIR WAY TO US.

B. GENERALLY ACCEPTED USE OF NARCOTICS CANNOT BE COUNTERACTED BY SMALL PILOT PROGRAMS AT THIS TIME- THE FIRST STEP MUST BE TO CONVINCE THE POPULATION AT LARGE THAT USE OF NARCOTICS IS DETRIMENTAL TO HEALTH AND WELFARE. AS PUT BY GENERAL FARAG, "A COMPREHENSIVE PROPAGANDA CAMPAIGN MUST BE CARRIED OUT-- IN THE SCHOOLS, IN THE MOSQUES, IN THE GOVERNMENT, AND IN THE STREETS." SUCH A CAMPAIGN IS, OF COURSE, FAR FROM THE REALM OF POSSIBILITY HERE NOW IN THE PRESENCE OF OTHER MORE PRESSING ECONOMIC, POLITICAL, AND MILITARY PROBLEMS.

C. THERE IS VIRTUALLY NOTHING IN THE WAY OF HOST COUNTRY PROGRAMS OR FACILITIES WHICH COULD BE BUILT UPON OR EXPANDED THROUGH PROGRAMS SUCH AS THOSE DESCRIBED IN REFTTEL.
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